

STATE OF CONNECTICUT
DEPARTMENT OF SOCIAL SERVICES

CONTRACT AMENDMENT

Contractor: COMMUNITY RENEWAL TEAM, INC.
Contractor Address: 555 WINDSOR STREET, HARTFORD, CT 06120-2418
Contract Number: 064C-SSP-02 / 11DSS5401EW
Amendment Number: A2
Amount as Amended: \$228,310
Contract Term as Amended: 07/01/11 - 03/31/15

The contract between **Community Renewal Team, Inc.** and the Department of Social Services which was last executed by the parties and approved the office of the Attorney General on 07/16/2014 is hereby further amended as follows:

1. The total maximum amount payable under this contract is increased by **\$15,222** from \$213,090 to \$228,312 to provide service enhancements for an additional 3 months.
2. The term of the contract is extended for an additional 3 months and the end date of the contract is changed from December 31, 2014 to March 31, 2015.
3. The budget on page 9 is hereby deleted and replaced by the budget on page 2 of this amendment.

All terms and conditions of the original contract, and any subsequent amendments thereto, which were not modified by this Amendment remain in full force and effect.

PART I

PROGRAM NAME

Asian Family Services-Domestic Violence Programs Services

064C-SSP-02/11DSS5401EW

FINANCING SUMMARY			
	(A) REQUESTED	(B) ADJUSTMENTS	(C) APPROVED
Total State Grant:	-		-
For Amendments Only			
Previously approved State Grant Amount of Amendment	\$213,090.00	\$ 15,222.00	\$ 228,312.00

ITEM / Line #	Subcategory	Line Item Total	Adjustments	Revised Total
1. UNIT RATE				
1a. Bed Days	\$ -		\$ -	\$ -
1b. Client Advocate	\$ -		\$ -	\$ -
1c. Security Deposit	\$ -		\$ -	\$ -
1d. Other Unit Rate Costs	\$ -		\$ -	\$ -
TOTAL UNIT RATE		\$ -	\$ -	\$ -
2. CONTRACTUAL SERVICES				
2a. Accounting	\$ -		\$ -	\$ -
2b. Legal	\$ 1,161.00		\$ 57.00	\$ 1,218.00
2c. Independent Audit	\$ 1,577.00		\$ 77.00	\$ 1,654.00
2d. Other Contractual Services	\$ 578.00		\$ 28.00	\$ 606.00
TOTAL CONTRACTUAL SERVICES		\$ 3,316.00	\$ 162.00	\$ 3,478.00
3. ADMINISTRATION				
3a. Admin. Salaries	\$ -		\$ -	\$ -
3b. Admin. Fringe Benefits	\$ -		\$ -	\$ -
3c. Admin. Overhead	\$ 15,818.00		\$ 1,493.00	\$ 17,311.00
TOTAL ADMINISTRATION		\$ 15,818.00	\$ 1,493.00	\$ 17,311.00
4. DIRECT PROGRAM STAFF				
4a. Program Salaries	\$ 129,796.00		\$ 8,576.00	\$ 138,372.00
4b. Prog. Fringe Benefits	\$ 37,463.00		\$ 2,401.00	\$ 39,864.00
TOTAL DIRECT PROGRAM		\$ 167,259.00	\$ 10,977.00	\$ 178,236.00
5. OTHER COSTS				
5a. Program Rent	\$ 2,911.00		\$ 502.00	\$ 3,413.00
5b. Consumable Supplies	\$ 6,987.00		\$ 498.00	\$ 7,485.00
5c. Travel & Transportation	\$ 1,156.00		\$ 144.00	\$ 1,300.00
5d. Utilities	\$ 1,067.00		\$ 220.00	\$ 1,287.00
5e. Repairs & Maintenance	\$ 1,893.00		\$ 300.00	\$ 2,193.00
5f. Insurance	\$ 2,798.00		\$ 196.00	\$ 2,994.00
5g. Food & Related Costs	\$ -		\$ -	\$ -
5h. Other Project Expenses	\$ 9,885.00		\$ 730.00	\$ 10,615.00
TOTAL OTHER COSTS		\$ 26,697.00	\$ 2,590.00	\$ 29,287.00
6. EQUIPMENT		\$ -	\$ -	\$ -
7. PROGRAM INCOME				
7a. Fees	\$ -		\$ 0	\$ 0
7b. Other Income	\$ -		\$ 0	\$ 0
TOTAL PROGRAM INCOME		\$ -	\$ 0	\$ 0
8. TOTAL NET PROGRAM COSTS		\$ 213,088.00	\$ 15,222.00	\$ 228,310.00
(sum of lines 1 through 6 minus line 7)				

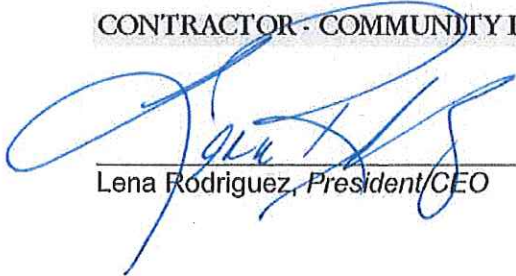
SIGNATURES AND APPROVALS

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The Contractor IS NOT a Business Associate under the Health Insurance Portability and Accountability Act of 1996 as amended.

Documentation necessary to demonstrate the authorization to sign must be attached.

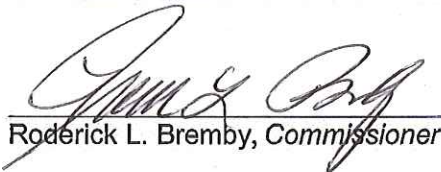
CONTRACTOR - COMMUNITY RENEWAL TEAM, INC.



Lena Rodriguez, President/CEO

12/18/2014
Date

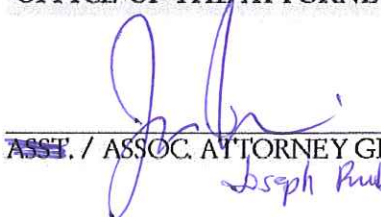
DEPARTMENT OF SOCIAL SERVICES



Roderick L. Bremby, Commissioner

12/29/2014
Date

OFFICE OF THE ATTORNEY GENERAL



ASST. / ASSOC. ATTORNEY GENERAL (Approved as to form)
Joseph Rubino

1/9/15
Date